## UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

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Washington, DC

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FORM D IHOMSON REUTERS

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	Seria	l						
DAT	RECEIVED							

3235-0076

Name of Offering: NYLIM Jacob Ballas Ind	ia Fund III, LLC - C	Offering of Shares			
Filing Under (Check box(es) that apply):	☐ Rule 504	Rule 505	Rule 506	☐ Section 4	I(6) ULOE
Type of Filing:	New Filing	☐ Amendment			
	A. B	ASIC IDENTIFICA	TION DATA		
1. Enter the information requested about the is	suer				
Name of Issuer ( check if this is an an	endment and name ha	s changed, and indica	ite change.)		
NYLIM Jacob Ballas India Fund III, LLC			<del></del>	<del>,</del>	
Address of Executive Offices	(Number	and Street, City, Stat	e, Zip Code)	Telephone Nun	(
1FS Court, TwentyEight Cybercity, Ebene,	Mauritius			+230 467 3000	1 / 2 A (
Address of Principal Business Operations	(Number	and Street, City, Stat	e, Zip Code)	Telephone Nun	08049989
(if different from Executive Offices)					00049808
Brief Description of Business					
Private equity fund.					
Type of Business Organization					
□ corporation	☐ limited partner	ship, already formed	区。	other (please specify)	: Mauritius public limited liability company
□ business trust	☐ limited partner	ship, to be formed			
Actual or Estimated Date of Incorporation or C	Organization:	Mont 0	h Yea	7 🗷 Actual	☐ Estimated
Jurisdiction of Incorporation: (Enter two-letter CN for Cana	U.S. Postal Service A da; FN for other foreig		:		FN

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTI	FICATION DATA			
	n requested for the fo	•	a.			
		has been organized within the pa				
	• •	to vote or dispose, or direct the v	•			urities of the issuer;
		rporate issuers and of corporate g	general and managing partners	of partnership issue	ers; and	
•	anaging partner of par					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last name first, if it Jetley, Rajan	ndividual)					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)				
Lower Arcade, The Ashok 50						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director		General and/or
Full Name (Last name Cont. (C)	adiodaatv			<del></del>		Managing Partner
Full Name (Last name first, if it	naividuai)					
Murdock, Brian Business or Residence Address	(Number and Stree	t City State Zin Code)				
	•	i, city, state, zip code)				
51 Madison Avenue, New Yor Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☑ Director		Sole Member
Check Box(es) that Apply.	- Tromoter	Beneficial Owner	- Executive Officer			Sole Welliber
Full Name (Last name first, if i	ndividual)					
Basanta Lala, Couldip						
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)				
IFS Court, Twenty Eight, Cyb	ercity, Ebene, Mau	ritius				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director		Sole Member
Full Name (Last name first, if i	ndividual)	·				·-
Joory, Dev						
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)				
IFS Court, Twenty Eight, Cyb	ercity, Ebene, Maur	ritius				
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if it	ndividual)					
New York Life Insurance Con	<del></del>					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)				
51 Madison Avenue, New Yor						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if is	ndividual)					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if it	ndividual)		, w, w,			
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)				
		<del></del>				

					B. 1	NFORMA	ATION A	BOUT O	FFERING					
1.	Has the issuer	sold, or do	oes the issue	er intend to				n this offeri lumn 2, if fi			••••••		Yes	No 区
2.	What is the m	inimum in	vestment the	at will be a	ccepted from	n any indiv	ridual?	·····	,				\$ <u>5,00</u> 0	0,0001
													Yes	No
3.	Does the offer Enter the infe													unamation for
4.	solicitation of registered wit a broker or de	f purchaser h the SEC	s in connect and/or with	tion with a state or :	sales of sec states, list th	urities in the name of	he offering the broker	. If a perso or dealer. I	on to be lis	ted is an a	ssociated p	erson or age	ent of a brol	ker or dealer
Full	Name (Last na	me first, if	individual)											
	tsche Bank AC					<del></del>								
	iness or Resider		•	·										
	ate Wealth Manager			er House,	1 Great W	inchester S	Street, Lon	don EC2N	2DB					
Nan	ne of Associated	a Broker of	Dealet											
Stat	es in Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	Purchaser	s							
	(Check "All S	States" or cl	heck individ	lual States)									🗵 Ail	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	(IL) [MT]	(IN) (NE)	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full	Name (Last na	me first, if	individual)											
	genheim Capi			1.0		~: 0 1								
	iness or Resider		,		i, City, Stat	e, Zip Code	;)							
	East 57th Stre			022										
State	es in Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	Purchaser	5						<del></del>	
	(Check "All S	tates" or cl	heck individ	lual States)	***************************************		• • • • • • • • • • • • • • • • • • • •		••••			************	🗖 Ail :	States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	(AR) (KS)	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) (MD)	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	(ID) [MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[он]	[OK]	[OR]	(PA)	
Full	[RI] Name (Last na	[SC] me first, if	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	<del></del>
	(		,											
Bus	iness or Resider	nce Addres	s (Numbe	r and Stree	t, City, Stat	e, Zip Code	:)							
Man		I D	Danlan								·		<del></del>	
ivan	ne of Associated	a Broker or	Dealer											
State	es in Which Per	son Listed	Has Solicite	ed or Inten	ds to Solicit	Purchasers	5		<u> </u>	<u></u> .				<del></del>
	(Check "All S	tates" or cl	neck individ	lual States)									🗆 All S	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]	
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] {OR]	[MO] [PA]	
,	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

<sup>&</sup>lt;sup>1</sup> The Fund may accept lesser amounts in its sole discretion.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
١.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold <sup>1</sup>
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	s
	Partnership Interests	\$	\$
	Other (specify) Mauritius Limited Liability Company Shares	\$ <u>400,000,000</u>	\$ <u>278,205,815</u>
	Total	\$ <u>400,000,000</u>	\$ <u>278,205,815</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number investors <sup>2</sup>	Aggregate Dollar Amount of Purchases <sup>1</sup>
	Accredited Investors	25	\$ <u>278,205,815</u>
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)	N/A	\$N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$N/A
	Regulation A	N/A	\$ <u>N/A</u>
	Rule 504	N/A	\$N/A
	Total	N/A	\$N/A
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	X	\$ <u> </u>
	Printing and Engraving Costs	🗵	\$5,000
	Legal Fees	X	\$_30,000
	Accounting Fees	X	\$_10,000
	Engineering Fees	_	\$_0
	Sales Commissions (specify finders' fees separately)		\$ <u>0</u>
	Other Expenses (identify) organizational expenses	<b>X</b>	\$ <u>1,455,000</u>
	Total	<b>X</b>	\$ <u>1,500,000 \</u>

<sup>&</sup>lt;sup>2</sup> The number of investors and the total amount sold may reflect U.S. and non-U.S. investors.

 $<sup>^{3}</sup>$  Estimated amounts provided for purposes of this Form D filing only.

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ses furnished in response to Part C			\$ <u>398,500,000</u>
es shown. If the amount for any prestimate. The total of the paymer	urpose is not known, furnish an estimate and check the box to the its listed must equal the adjusted gross proceeds to the issuer set		
		Öfficers, Directors, a	nd Payments
d fees		X \$_4	\$
of real estate		<b></b>	
ental or leasing and installation of	machinery and equipment	□ \$	🗆 \$
on or leasing of plant buildings and	facilities	□ \$	D \$
		<b>-</b> \$	□ \$
of indebtedness		□ \$	🗆 \$
pital		<b></b>	🗆 \$
eify): INVESTMENTS		<b>"</b> \$	× \$398,500,000
tals		X \$ <u>*</u>	<b>■</b> \$398,500,000
ents Listed (column totals added).		<u> </u>	× \$398,500,000
aly caused this notice to be signed.		der Rule 505 the	following signature constitu
y the issuer to furnish to the U.S. S	securities and Exchange Commission, upon written request of its sta		
ype)	Signature	Date	
Ballas India Fund III, LLC	Uposout lan	23 April	2008
(Print or Type)	Title of Signer (Print or Type)	1	
	low the amount of the adjusted grass shown. If the amount for any prestimate. The total of the paymer pronse to Part C - Question 4.b about the paymer pronse to Part C - Question 4.b about the paymer pronse to Part C - Question 4.b about the paymer pronse to Part C - Question 4.b about the paymer pronse to Part C - Question 4.b about the pronse to Part C - Question 4.b about the pronse to Part C - Question 4.b about the paymer pronse to Part C - Question 4.b about the payme	ental or leasing and installation of machinery and equipment on or leasing of plant buildings and facilities of other businesses (including the value of securities involved in this offering that d in exchange for the assets or securities of another issuer pursuant to a merger) of indebtedness apital diffy): INVESTMENTS tals tals tents Listed (column totals added)  D. FEDERAL SIGNATURE  ally caused this notice to be signed by the undersigned duly authorized person. If this notice is filed un y the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its sta to security pursuant to paragraph (b)(2) of Rule 502.  Signature  Sallas India Fund III, LLC	low the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of a shown. If the amount for any purpose is not known, furnish an estimate and check the box to the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set ponse to Part C - Question 4 b above.  Payments Officers, Directors, a Affiliates of real estate.

<sup>&</sup>lt;sup>4</sup> The Investment Manager, an affiliate of the Issuer, will be entitled to receive management fees, placement fees and certain other fees. The Issuer's confidential offering materials set forth detailed discussions of these fees.

2. Ti su		E. STATE SIGNATURE sently subject to any of the disqualification provisions of See Appendix, Column-5, for state response. NOT		Yes	No
2. Ti su					No
2. Ti su					No
2. Ti su					
su	No condensioned innone books, and and long to	See Appendix, Column 5, for state response. NOT		ш	
su	The condensation and decrease beautiful condensation as a		APPLICABLE		
3. T	ne undersigned issuer hereby undertakes to t uch times as required by state law.	furnish to any state administrator of any state in which the	his notice is filed, a notice on Form	m D (17 CFR	239.500) a
	he undersigned issuer hereby undertakes to f	urnish to the state administrators, upon written request, it	nformation furnished by the issuer	to offerees.	
(+	JLOE) of the state in which this notice is file	uer is familiar with the conditions that must be satisfied and understands that the issuer claiming the availabilit APPLICABLE			
person.		contents to be true and has duly caused this notice to be s		gned duly auth	norized
issuer (	(Print or Type)	Signature	Date		
NYLIN	И Jacob Ballas India Fund III, L.I.C	Ger. War	23 April 2008		
Name o	of Signer (Print or Type)	Title of Signer (Print or Type)			<del></del>
By: Co	uldip Basnata Lala	Director			
<del></del>			** <u> </u>	<u> </u>	
Instruct					
rint inc	Any copies not manually signed must be no	under his signature for the state portion of this form. Or otocopies of the manually signed copy or bear typed or p	ne copy of every notice on Form D	) must be mar	iually

APPENDIX	
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1	2		2 3 4							
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	\$400,000,000 Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
со										
ст										
DE		X	See above	1	\$2,000,000	N/A	N/A	N/A	N/A	
DC	<u> </u>									
FL										
GA		х	See above	1	\$4,000,000	N/A	N/A	N/A	N/A	
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NM	<u> </u>	<u> </u>						<u> </u>		

NY	Х	See Above	4	\$72,500,000	N/A	N/A	N/A	N/A
NC								
ND								
ОН								
ОК								
OR						:		
PA								
RI								
sc								
SD								
TN								
TX				-				_
UT								
VT								
VA								
WA_								
wv								
WI								
WY								
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**END**